HTE# 57-535-18500 Harnett County Department of Public Health 19978 Operation Permit	
Name: (owner) Cachell Name: (owner) Cachell System Installer: DC Cachell Registration # Basement with plumbing: Garage Humber of Bedrooms Type of Water Supply: Community Public Well Distance from well feet System Type: Lack to 25%, Add. System Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal. This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.	γι
Les Brand	
Dave # 15 16	,
PERMIT CONDITIONS:	<u>k)</u>
I. Performance: System shall perform in accordance with Rule .1961. II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes No If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
Drainage Field ditches of each ditch 150 feet ditches fee	gallons
Authorized State Agent D2-21-08	

HTE# 07-530-18500